

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2001

Application or Docket Number

*COMP 1027*  
*201-3945*

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|   |               |              |
|---|---------------|--------------|
| TOTAL CLAIMS  | 20            |              |
| FOR   | NUMBER FILED  | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 20 minus 20 = | 0            |
| INDEPENDENT CLAIMS  | 3 minus 3 =   | 0            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |               |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

|             |   |      |                                    |               |
|-------------|---|------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT  |      | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | • 27 | Minus                              | -- 25 = 2     |
|             | Independent   | • 3  | Minus                              | --- 3 =       |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |      |                                    |               |

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

|           |        |    |           |        |
|-----------|--------|----|-----------|--------|
| RATE      | FEE    |    | RATE      | FEE    |
| BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| X\$ 9=    |        | OR | X\$18=    |        |
| X42=      |        | OR | X84=      |        |
| +140=     |        | OR | +280=     |        |
| TOTAL     |        | OR | TOTAL     | 240    |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           | 100.00         |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE | 100.00         |

9-6-06

(Column 1) (Column 2) (Column 3)

|             |   |      |                                    |               |
|-------------|---|------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT  |      | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | • 30 | Minus                              | -- 27 = 3     |
|             | Independent   | • 3  | Minus                              | --- 3 =       |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |      |                                    |               |

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           | 150.00         |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE | 150.00         |

(Column 1) (Column 2) (Column 3)

|             |   |   |                                    |               |
|-------------|---|---|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT  |   | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | • | Minus                              | --            |
|             | Independent   | • | Minus                              | ---           |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |                                    |               |

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.